

A Blueprint for Success: Medicaid Reimbursement for Community Health Worker Services in South Dakota

29TH JANUARY 2020



South Dakota Cardiovascular Collaborative

State Strategic Plan 2017-2021

Vision: Healthy people, Healthy communities, Healthy South Dakota
Mission: Improve quality of life of all South Dakotans through prevention and control of heart disease and stroke

Download the entire South Dakota Cardiovascular
Collaborative Strategic Plan at
doh.sd.gov/diseases/chronic/heartdisease

Goals			
I. IMPROVE DATA COLLECTION Drive policy and population outcomes through improved data collection and analysis for heart disease and stroke.	II. PRIORITY POPULATIONS Address prevention and treatment needs of priority populations in South Dakota for heart disease and stroke.	III. CONTINUUM OF CARE Coordinate and improve continuum of care for heart disease and stroke.	IV. PREVENTION & MANAGEMENT Enhance prevention and management of heart disease and stroke.
Objectives			
1. Identify and track data to support at least one heart disease and stroke policy change or recommendation by 2021. ¹ In Process* 2. Increase input into at least 4 data collection tools by organizations and/or individuals by 2021. ¹ In Process* <small>*Integrated across other goal areas</small>	1. Decrease the age-adjusted death rate due to heart disease in the American Indian population from 212.5 per 100,000 to 202.0 per 100,000 by 2021. ² Progress: 241.4 per 100,000 (2017) 2. Decrease the age-adjusted death rate due to stroke in the American Indian population from 48.5 per 100,000 to 46 per 100,000 by 2021. ³ Progress: 48.2 per 100,000 (2017)	1. Decrease emergency response times by decreasing average ambulance chute times from 5.23 minutes in 2018 to 4.25 minutes by 2021. ⁴ Progress: 5.23 mins (2018) 2. Increase the number of EMTs in South Dakota from 3,281 EMTs in 2015 to 3,850 EMTs by 2021. ⁵ Progress: 3,301 EMTs (2018) 3. Identify and designate 5 cardiac ready communities by 2021. Progress: 1 community pursuing designation (2019)	1. Decrease prevalence of heart attack from 4.7% (2015) to 4.45% (5% decrease) by 2021. Progress: 4.9% (2017) 2. Decrease prevalence of stroke from 2.6% (2015) to 2.47% (5% decrease) by 2021. Progress: 2.7% (2017)
Strategies			
A. Identify and promote tracking of a common set of minimum cardiovascular health data for use for both prevention and improvement of post-cardiac event outcomes.	A. Promote the different models of team-based, patient-centered care (health cooperative clinic, health homes, PCMH). B. Maximize community-clinical linkages (e.g. CHW, different sectors). C. Support policies that increase access to heart disease and stroke care for priority populations. D. Improve collaboration with tribal communities.	A. Utilize results of needs assessment to address infrastructure and sustainability of EMS. B. Ensure utilization and sustainability of community-based resources and programs such as Mission: Lifeline, LUCAS, and pit-crew CPR for EMS services. C. Identify and expand mobile integrated health programs. D. Promote the cardiac ready community program to South Dakota communities ensuring at minimum 5 are enrolled in the program.	A. Encourage the implementation of quality improvement processes in health systems. B. Promote awareness, detection and management of high blood pressure (clinical innovations, team-based care, and self-monitoring of blood pressure). C. Support the expansion of prevention and lifestyle interventions in communities and for all ages across the lifespan.

Sources: 1) BDO; 2) Data from healthcare facilities; 3) Vital statistics 2015; 4) ORH EMT database; 5) BRFSS 2015


Last Updated: August 2019

<https://doh.sd.gov/diseases/chronic/heartdisease/state-plan.aspx>

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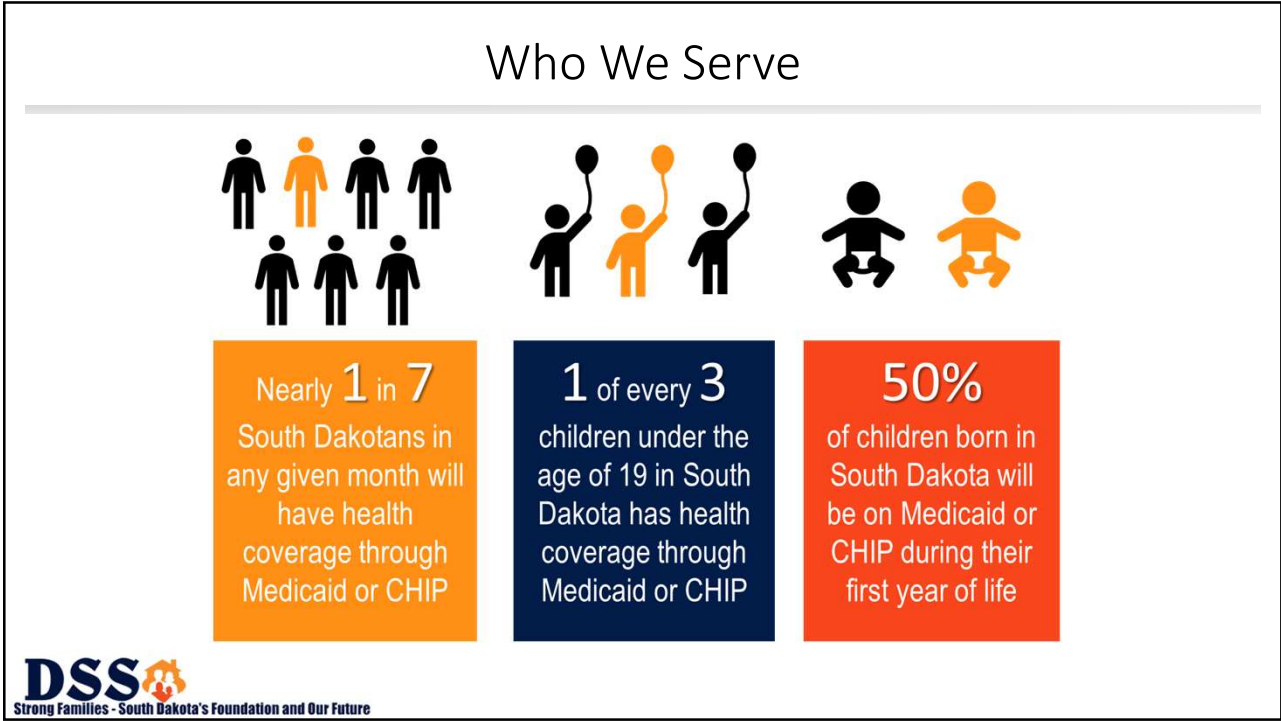
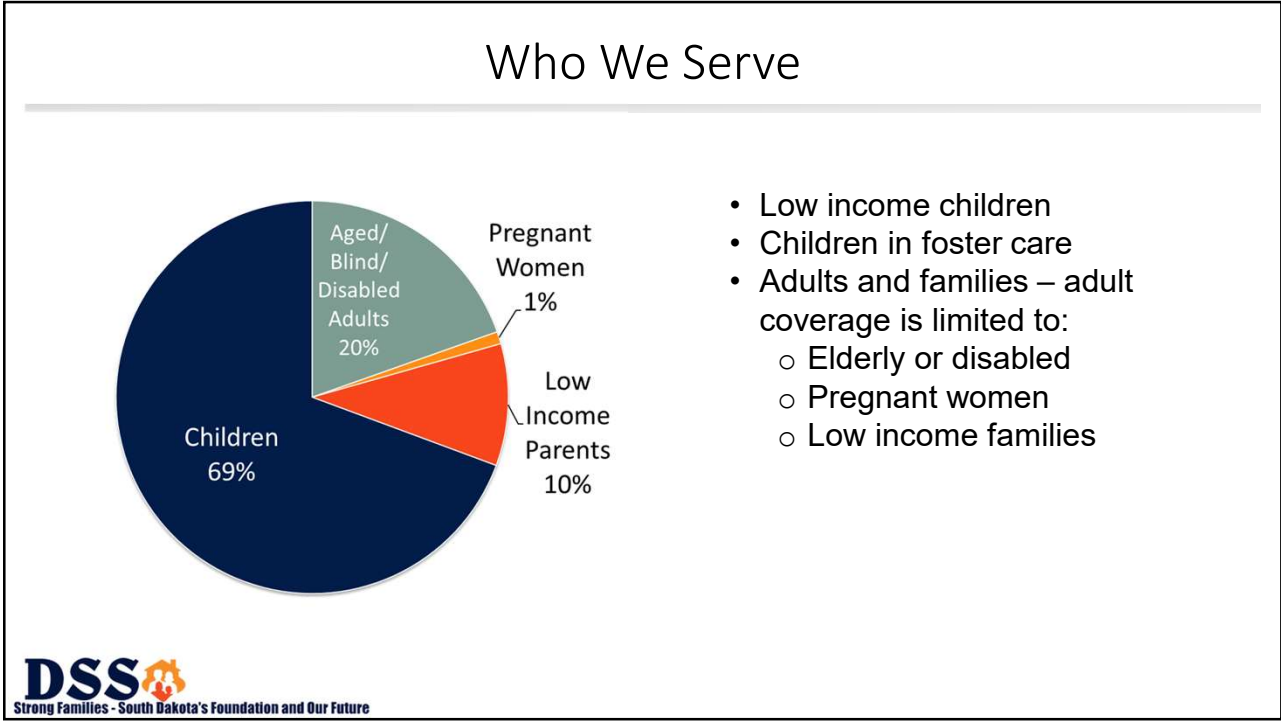
January 29, 2020

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South Dakota Medicaid | 700 Governors Drive | Pierre, SD 57501

Agenda

- Overview of SD Medicaid
- Community Health Worker Services in South Dakota Medicaid
- Enrolling as a Community Health Worker
- Additional Resources
- Questions




Community Health Worker

- CHW was added as a Medicaid service in April 2019.
- Goal of CHW is to prevent disease, disability, and other health conditions. Assist individuals to self manage chronic conditions.
- Covered conditions include but are not limited to:
 - Mental health conditions
 - Substance use disorder
 - Cancer
 - Diabetes
 - Heart Disease
- CHW services can also be provided for those with barriers that impact health as determined by a risk assessment. Barriers include but are not limited to:
 - Geography and distance from health care services
 - Cultural or language barriers that lead to an individual not following medical recommendations

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Community Health Worker in Medicaid



- In order for a Medicaid recipient to receive CHW services the service must be ordered by a physician, physician assistant, nurse practitioner, or certified nurse midwife.
- CHW services must be delivered as outlined in a recipients care plan written by the recipients provider.
- Services are provided face to face. Face to face can include telemedicine.
- Services can be provided in individual and group settings. Group settings are limited to 8 people.

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Community Health Worker in Medicaid

- SD Medicaid has been working to expand the list of approved curriculums that can be reimbursed for CHW. Approved curriculums include:
 - IHS Community Health Representative
 - Family Spirit
 - Better Choices Better Health™
 - National Diabetes Prevention Program
 - CHW program approved by the South Dakota Board of Technical Education/ South Dakota Board of Regents



Medicaid Reimbursement

- There are three billable services under CHW:

CPT	Description	Amount
98960	Self-management education & training 1 patient - 30 minutes	\$ 20.00
98961	Self-management education & training 2-4 patients - 30 minutes	\$ 10.00
98962	Self-management education & training 5-8 patients - 30 minutes	\$ 7.00

- 1 unit =16-45 minutes of service. 2 units= 46+ minutes of service.
- No more than 2 units of any combination of the CHW services are billable on a single date of service.
- A recipient is limited to 104 units of services in a plan year from July 1 to June 30.



Medicaid Portal

Through the Medicaid Portal a provider can:

- Check recipient eligibility (the provider should check the portal for eligibility every month)
- Submit Claims
- Check the status of claims



Medicaid Enrollment

- Medicaid enrolls organizations as CHW providers. We are not able to enroll individual people as a CHW.

1. Complete the appropriate application on the SD MEDX site
2. Submit required provider enrollment documentation
3. Submit Community Health Worker Supplemental Addendum, and CHW Policies

Additional information on enrolling as a Medicaid Provider can be found at <https://dss.sd.gov/sdmedx/includes/providers/becomeprovider/index.aspx>. For assistance applying to become a Medicaid Provider contact SD Provider Enrollment at sdmedxgeneral@state.sd.us or call 1-866-718-0084

CHW Supplemental Agreement and Policies

- Abuse, Neglect, and Exploitation- identification and prevention
- Staffing – qualifications, background screenings
- Staff Training- chronic diseases, cultural competency
- Intake and Admission- reviewing and responding to referrals
- Discharge – discontinuation of services
- Continentiality- HIPPA
- Recipient rights and responsibilities
- Documentation- date, type, scope of services provided
- Emergency response-
- Health and safety- universal precautions
- Quality Assurance – monitoring an correcting issues
- Scope of services – what services are billable/covered and which are not



- Once the application is approved the agency can begin to provide CHW services. Newly enrolled agencies who need technical assistance related to billing can reach out to DSS for training.



Resources


■ CHW Provider Manual -
<https://dss.sd.gov/docs/medicaid/providers/billingmanuals/CommunityHealthWorkerServices.pdf>

■ CHW Fee Schedule-
<https://dss.sd.gov/docs/medicaid/providers/feeschedules/CHWFY20.pdf>

■ Medicaid Portal Trainings - <https://dss.sd.gov/medicaid/portal.aspx>

■ CMS 1500 Billing Instructions -
<https://dss.sd.gov/docs/medicaid/providers/billingmanuals/CMS%201500%20Claim%20Instructions.pdf>

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Questions



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